



Washington State  
Department of Health  
Board of Osteopathic Medicine and Surgery  
Meeting Minutes  
November 16, 2007

The meeting of the Washington State Board of Osteopathic Medicine and Surgery was called to order by Daniel Dugaw, DO, Chair, at 9:07 a.m. The meeting was held at: Radisson Hotel Gateway, 18118 International Blvd, Seattle, Washington 98188.

Board Members Present: Daniel Dugaw, DO, Chair  
William Gant, Public Member, Vice Chair  
Thomas Shelton, DO  
Catherine Hunter, DO  
Larry Smith, DO (After 12:00 noon)

Staff Present: Blake Maresh, Executive Secretary  
Dori Jaffe, Assistant Attorney General  
Arlene Robertson, Program Manager  
Erin Obenland, Disciplinary Program Manager  
Joe Mihelich, Administrative Staff  
Judy Young, Staff Attorney, via telephone

Guests Present: James N. Thompson, M.D., President/CEO;  
and Martin Crane, M.D., Member Board of Directors - Federation of State Medical Boards  
Laurie Jenkins, Assistant Secretary, Department of Health  
Steve Saxe, Director, Health Professions and Facilities Office  
Tami Thompson, Health Policy Analyst

## Open Session

### 1. Call to Order

#### 1.1 Approval of Agenda

The agenda was approved as published.

#### 1.2 Approval of Minutes - September 21, 2007 meeting

The minutes of the September 21, 2007 meeting minutes were approved.

#### 1.3 Approval of Minutes - October 10, 2007 conference call minutes

The minutes of the October 10, 2007 conference call minutes were approved.

#### 1.4 Approval of Minutes - October 31, 2007 conference call minutes

The minutes of the October 31, 2007 conference call minutes were approved.

### 2. Federation of State Medical Boards - Presentation and Updates of Federation Activities - James N. Thompson, M.D., President/CEO; Martin Crane, M.D., Member Board of Directors

#### 2.1 Comprehensive Review of USMLE - Opportunity to ask Drs. Thompson and Crane any questions regarding the review. ISSUE

The Board hosted Drs. Thompson and Crane from the Federation of State Medical Boards (FSMB). An overview of FSMB services included the Federation Credentials Verification Service (FCVS); Physician Data Center; International Association of Medical Regulatory Authorities (IAMRA); National Clearinghouse on Internet Prescribing (NCIP); Post-Licensure Assessment System (PLAS) which includes two complementary programs, Special Purpose Examination (SPEX) and Assessment Center Program (ACP).

They provided updates on the Special Committees & Workgroups. The draft report from the Special Committee on Maintenance of Licensure will address continuing competency throughout a practitioner's practice lifetime. It will be considered for adoption at the 2008 annual meeting. Other workgroups include Emergency Preparedness, National

Clearinghouse on International Medical Schools, and Professionalism.

The FSMB meets with each member board approximately every three years. The visit also provides an opportunity for board members who are unable to attend the annual meeting to keep updated on the services and activities of the FSMB. Input was solicited from the board members on how FSMB can better serve them.

ACTION

No action was required.

3. **11:00 am-11:45 pm** Health Services Quality Assurance Updates  
Laurie Jenkins, Assistant Secretary, Department of Health

ISSUE

Ms. Jenkins provided an update on the progress of the organizational review. A significant amount of background work has been completed to identify all of the Division functions and processes. All levels of staff have participated in various workgroups to identify the work done by the Division. Ms. Jenkins compared the current organizational chart with the proposed organizational changes. The Health Systems Quality Assurance Division will include five offices in addition to the Office of the Assistant Secretary. These will be Health Professions and Facilities Office, Customer Service Office, Investigation and Inspection Office, Legal Services Office, and Community Health Systems Office.

Board support will be included as part of the Health Professions and Facilities Office. Steve Saxe, newly appointed Director, was present and introduced to the Board.

Ms. Jenkins assured the Board that they will not see a big change in most of their activities. They will still be working with the same people, fees will continue to support their profession, and their authority remains unchanged.

Ms. Jenkins also updated the Board on other activities the Division is pursuing. The performance audit issues are being addressed, business processes are being coordinated with the implementation of ILRS, and staff workgroups will continue working toward completion of the reorganization. The Board was encouraged to send any questions or

suggestions pertaining to the proposed changes directly to Laurie or Bonnie King.

4. **11:45 am-12:30 am** Mandatory Reporting Rulemaking Updates -  
Tami Thompson, Health Policy Analyst

4.1 Mandatory Reporting Rules Informational Memo

4.2 Where did these draft rules come from?

4.3 Mandatory Reporting Rules - Draft October 2007

ISSUE

Ms. Thompson reported on the modifications made to the proposed mandatory reporting rules. The draft rules were compared with existing professions' rules to ensure all of the current reporting criteria was included. Every effort has been made to avoid reporting of unsubstantiated allegations, rumors, or suspicions of unprofessional conduct under self-reporting and reporting of other license holders. Reporting by entities applies only after a determination and permitted exemptions are addressed.

Ms. Thompson indicated it is likely there will be revisions after the current comment period.

ACTION

Since the board members had not had an opportunity to thoroughly review the draft language, the proposed rules will be reviewed again at the January meeting. Comments can be made relative to the CR 102 proposed language.

5. Disciplinary Issues

5.1 Imminent Danger Cases - Consider Procedure 212 relative to identifying and expediting cases that meet specified criteria.

5.1.1 Talking points re: criteria for imminent harm

ISSUE

The Board reviewed Procedure 212 which addresses how to manage cases which may pose imminent danger to patients or may have an immediate adverse impact on overall community health. The process directs certain staff to convene an Expedited Case Management Team (ECMT) meeting to assess the complaint. If determined to be an imminent danger case it would follow an expedited process as outlined in the procedure.

#### ACTION

The Board noted the procedure did not include a board member. A board member should be involved in the ECMT meeting. Also, any investigation would need to be authorized by the Board.

The Board indicated the criteria for selecting cases was too general, better definitions are needed. The criteria is written so every complaint could be considered to be an imminent danger case. Staff will advise the Director's office of the Board's concerns.

#### 5.2 Sanction Guidelines - Consider adoption of the Sanction Guidelines

5.2.1 Letter from Governor Christine O. Gregoire regarding the performance audit of Health Professions Quality Assurance

#### ISSUE

The Board considered a letter from Governor Gregoire regarding her support of the sanction guidelines. The Governor requested the Board adopt the sanction guidelines. The revised guidelines were also reviewed as the trial period for their use had ended.

The Board has had little opportunity to use the guidelines since adopting the revisions in March for the remaining trial period.

#### ACTION

The Board approved use of the sanction guidelines. Board members are encouraged to bring forth any issues that arise when determining sanctions.

#### 6. Rules

6.1 American Society of Plastic Surgeons - Comments regarding office-based surgery rules.

#### ISSUE

The American Society of Plastic Surgeons (ASPS) provided comments relative to ensuring patient safety in office-based settings. The ASPS feels strongly that plastic surgery must be performed in office-based surgical facilities that are accredited by a national organization or licensed by the state in which the facility is located. They also recommend that the practitioner be board certified.

#### ACTION

The ASPS will be advised their comments will be taken into consideration when rules language is developed.

#### 7. Scope of Practice

7.1 Osteopathic Manipulative Treatment and the Office Visit-Request for clarification from Richard W. Koss, DO

7.1.1 Draft policy for discussion purposes

#### ISSUE

Dr. Koss requested clarification relative to performing an evaluation and management service prior to performing an Osteopathic Manipulative Treatment (OMT). Some parties feel that OMT (a medical procedure) is a stand alone medical service and does not warrant the need to establish a physician-patient relationship and does not justify an office visit (evaluation and management service). It is Dr. Koss' understanding this would be outside the basic standards of medical care. He believes it would be inappropriate for a DO to perform OMT without establishing a proper physician-patient relationship which requires evaluation and management services prior to each OMT.

#### ACTION

The Board considered a policy statement, using the same premise as when a practitioner prescribes medication to a patient. It would not be the standard of care to provide OMT without taking an evaluation of the patient's condition prior to treatment. The draft policy was approved for review by the Department.

#### 8. Program Manager Reports

8.1 Budget Report - November 2007

8.1.1 Fee Study

Ms. Robertson provided the November report which reflects the allocation amounts for 2007-2009 biennium. The allocation has doubled from last biennium.

Although the Department has conducted a fee study, an increase in the fees will need to be approved by the Legislature before being implemented.

8.2 Washington Physicians Health Program - September 2007  
Statistical Information

The September 2007 report was provided. No action was needed.

9. Executive Director Reports  
9.1 Department/Division Updates

Mr. Maresh indicated he had recently attended the AIM regional workshops. Several ISU investigators recently attended the AIM Investigator Training. The investigator training has been so well received that another session is being planned for the near future. Mr. Maresh advised that he has been nominated as Vice-President of the AIM organization. Elections will be held at the annual meeting April 30, 2008. If elected, he will be involved in planning and participating in AIM meetings and other activities.

The ILRS system is anticipated to "go live" in January. Staff will be training on the new system during December, January and February.

The Washington State Medical Association has endorsed the Medical Directors' group opioid guidelines. Mr. Maresh asked if there was any change in the Board's position regarding those guidelines. The Board indicated its position is reflected in the rules and Guidelines for Management of Pain.

9.2 Legislative Issues

Mr. Maresh indicated the performance audit recommendations will likely result in proposed legislation in the upcoming session. The Board will be advised as pertinent legislation is filed.

9.3 Conference Attendance Report

Mr. Maresh reported on the Citizen's Advocacy Center conference recently held in Seattle. Several of the program participants were from the Department of Health and other Washington organizations. A comprehensive report was provided on the performance audit findings, the Department of Health's experience during the audit process, and action being taken as a result of the findings.

Mr. Gant indicated the CAC conference was very enlightening. He noted there are a lot of differences in how the various states' regulatory bodies function.

10. Correspondence

10.1 Federation of State Medical Boards - Request for 2008 resolutions, candidate nominations and committee appointments

There were no recommendations to submit to the Federation.

10.2 Department of Health & Human Services - Notice of information that is available electronically from the U.S. Food and Drug Administration

The information was provided as optional ways to obtain information from the FDA. No further action was required.

11. (*Open Session*) Settlement Presentations

Jeffrey R. Jamison, DO - Docket No. 07-03-A-10600P  
Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

Judy Young, Staff Attorney, provided the background information on the case and the basis for the Statement of Charges. Bill Gant, reviewing board member, concurred with the proposed settlement conditions. Mr. Gant did not participate in the decision.

The Board's decision was made in executive session. The respondent will be notified of the Board's determination by mail.

Closed Session

12. Statement of Allegations/Stipulation to Informal  
Disposition presentations  
No STIDs were presented.

13. Report Reviews/Investigative Authorizations

Two reports were reviewed. One report was forwarded to ISU. Case 2007-11-00010P was closed as no violation.

14. Disciplinary Case Reviews - Reviewing Board Member Reports

<u>CASE NUMBER</u>	<u>CASE DISPOSITION</u>
2004-10-00010A	Closed no cause for action; evidence does not support a violation.
2006-03-00010P	Case forwarded to Legal Unit for legal and expert review; possible statement of charges.



2006-03-00020P	Case forwarded to Legal Unit for legal and expert review; possible statement of charges.
2006-04-00060P	Closed no cause for action; evidence does not support a violation.
2007-03-00020P	Closed no cause for action; evidence does not support a violation.
2007-04-00040P	Case forwarded to Legal; issue SOA/STID.
2007-05-00040P	Closed no cause for action; evidence does not support a violation.
2007-05-00050P	Closed no cause for action; evidence does not support a violation.
2007-06-00010P	Case forwarded to Legal Unit for legal and expert review; possible statement of charges.
2007-06-00030P	Closed no cause for action; evidence does not support a violation.

15. Open case report

The current open case report was provided. No action was required.

16. Compliance Issues

There were no compliance issues.

17. Application Review

There were no applications for review.

The meeting was adjourned at 4:15 p.m.

Respectfully Submitted

Arlene Robertson  
Program Manager

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